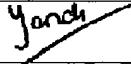


Best Available Copy

CHANGE OF CORRESPONDENCE ADDRESS <i>Application</i>		PTO/SB/22 (10-01) Approved for use through 10/31/2002. OMB 0651-0036 U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE Under the Paperwork Reduction Act of 1996, no persons are required to respond to a collection of information unless it displays a valid OMB control number.	
Address to: Assistant Commissioner for Patents Washington, D.C. 20231		Application Number	09/973352
		Filing Date	10/09/2001
		First Named Inventor	YANDI ONGKOJOYO
		Art Unit	
		Examiner Name	
		Attorney Docket Number	
Please change the Correspondence Address for the above-identified application to: <input type="checkbox"/> Customer Number <input type="text"/> Place Customer Number Bar Code Label here OR <input checked="" type="checkbox"/> Firm or Individual Name YANDI ONGKOJOYO Address DHARMAHUSADA PERMAI XII/9 N-405 Address City SURABAYA State EAST JAVA Zip 60116 Country INDONESIA Telephone +62 (31) 5941857 Fax			
This form cannot be used to change the data associated with a Customer Number. To change the data associated with an existing Customer Number use "Request for Customer Number Data Change" (PTO/SB/124).			
I am the: <input checked="" type="checkbox"/> Applicant/Inventor. <input type="checkbox"/> Assignee of record of the entire interest. <input type="checkbox"/> Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96). <input type="checkbox"/> Attorney or Agent of record. <input type="checkbox"/> Registered practitioner named in the application transmittal letter in an application without an executed oath or declaration. See 37 CFR 1.33(a)(1). Registration Number _____			
Typed or Printed Name YANDI ONGKOJOYO Signature  Date 11/09/2004			
<small>NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.</small>			
<input checked="" type="checkbox"/> Total of 4 forms are submitted.			

Burden Hour Statement: This form is estimated to take 3 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.